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In re Patent Application of

VON BORSTEL

Serial No. 09/763,955

Filed: February 28, 2001

For: COMPOSITIONS AND METHODS FOR TREATMENT OF  
MITOCHONDRIAL DISEASES

\* \* \* \* \*

Atty. Ref.: 1331-334

Group:

Examiner:



August 2, 2001

Assistant Commissioner for Patents  
Office of Initial Patent Examination  
Customer Service Center  
Washington, DC 20231

Sir:

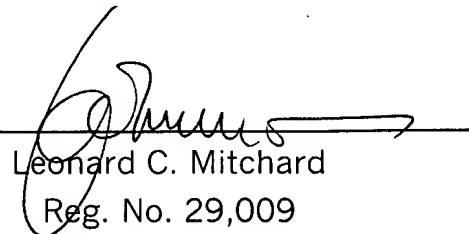
**REQUEST FOR CORRECTION OF FILING RECEIPT**

Enclosed is a copy of the Filing Receipt for the above-identified application, for which correction is respectfully requested under the heading "Domestic Priority data as claimed by applicant." Please insert the following: **"This is a 371 of PCT/US99/19725 file August 31, 1999, which is a CIP of 09/144,096, filed August 31, 1998."** The correction is shown in red on the attached copy of the filing receipt. Please note your records accordingly.

Respectfully submitted,

**NIXON & VANDERHYE P.C.**

By: \_\_\_\_\_

  
Leonard C. Mitchard  
Reg. No. 29,009

LCM:lks  
1100 North Glebe Road, 8th Floor  
Arlington, VA 22201-4714  
Telephone: (703) 816-4000  
Facsimile: (703) 816-4100



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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	APP DOCKET NO.	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/763,955	02/28/2001	1632	748	1331-334		47	7

CONFIRMATION NO. 3848

## FILING RECEIPT



\*OC000000006268530\*

Nixon & Vanderhye  
8th Floor  
1100 North Glebe Road  
Arlington, VA 22201-4714

Date Mailed: 07/06/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Reld W. Von Borstel, Potomac, MD;

## Domestic Priority data as claimed by applicant

THIS APPLICATION IS A 371 OF PCT/US99/19725 08/31/1999, which is

A CIP of 09/144,096 08/31/98.  
Foreign Applications2001 JUL 11 PM 2:03  
NIXON & VANDERHYE FC

Projected Publication Date: N/A

Non-Publication Request: No

Early Publication Request: No

\*\* SMALL ENTITY \*\*

## Title

Compositions and methods for treatment of mitochondrial diseases

## Preliminary Class

514

Data entry by : ORDENEZ, MARTA

Team : OIPE

Date: 07/06/2001



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Bib Data Sheet

CONFIRMATION NO. 3848

<b>SERIAL NUMBER</b> 09/763,955	<b>FILING DATE</b> 02/28/2001 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1632	<b>ATTORNEY DOCKET NO.</b> 1331-334
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**APPLICANTS**

Reld W. Von Borstel, Potomac, MD;

**\*\* CONTINUING DATA \*\*\*\*\***

THIS APPLICATION IS A 371 OF PCT/US99/19725 08/31/1999  
WHICH IS A CIP OF 09/144,096 08/31/1998

6,472,378

~~FILE COPY~~  
OK 81

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

None 81

**\*\* SMALL ENTITY \*\***

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MD	SHEETS DRAWING	TOTAL CLAIMS 47	INDEPENDENT CLAIMS 7
Verified and Acknowledged Examiner's Signature _____ Initials _____					

**ADDRESS**

Nixon & Vanderhye  
8th Floor  
1100 North Glebe Road  
Arlington, VA 22201-4714

**TITLE**

Compositions and methods for treatment of mitochondrial diseases

<b>FILING FEE RECEIVED</b> 748	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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